Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

| | K Reduction Act of 1995, no persons are require | | | | |
|--|--|--|-----------|---|---|
| TERMINAL | DISCLAIMER TO OBVIATE A I REJECTION OVER A "PRIOR" | OOUBLE | PATE T | NTING | Docket Number (Optional) 53951-127 |
| In re Application of: De | nnis M. Treu, et al. | | | | |
| Application No.: 10/808 | ,213 | | | | |
| Filed: March 23, 2004 | | | | | |
| For: RENAL REPLACE | MENT THERAPY DEVICE FOR CONTR | OLLING FI | .UID BAI | ANCE OF TREAT | ED PATIENT |
| the expiration date of the and 173, and as the ter- granted on the instant a | EMEDICAL_INC. ow, the terminal part of the statutory term ter full statutory term prior patent No. 6.6 m of said prior patent is presently short application shall be enforceable only for a ty patent granted on the instant application | n of any pa 38,477 B1 ened by an | y termina | ted on the instant as the term of said al disclaimer. The c od that it and the p | prior patent is defined in 35 U.S.C. 154 owner hereby agrees that any patent so prior patent are commonly owned. This |
| would extend to the exp patent is presently sho expires for failure is held unenforces | | efined in 3 | U.S.C. | 154 and 173 of the | t granted on the instant application that prior patent, "as the term of said prior |
| is statutorily discla has all claims can is reissued; or | a court of competent jurisdiction; imed in whole or terminally disclaimed ur celed by a reexamination certificate; erminated prior to the expiration of its full | | | esently shortened b | oy any terminal disclaimer. |
| Check either box 1 or 2 | below, if appropriate. | | | | |
| | ns on behalf of a business/organization (ersigned is empowered to act on behalf of | | | | r, government agency, |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were maje with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 10/1 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patient issued thereon. | | | | | |
| 2. The undersign | ned is an attorney or agent of record. Re | g. No. <u>38,</u> | 720 | | |
| | un here | | | | February 20, 2007 |
| | | Signature | | | Date |
| Mark A. Catan | | | | | |
| | | Ty | ped or p | inted name | |
| | | | | | 202.416.5818 Telephone Number |
| ✓ Terminal dis | claimer fee under 37 CFR 1.20(d) include | ed. | | | |
| | VARNING: Information on this form ma se included on this form. Provide credi | | | | |
| *Statement under 37 C Form PTO/SB/96 may | CFR 3.73(b) is required if terminal disclain be used for making this certification. See | ner is signe MPEP § 32 | d by the | assignee (owner). | |
| This collection of informati | on is required by 37 CFR 1.321. The information | on is required | to obtain | or retain a benefit by | the public which is to file (and by the USPTO |

This collection of tratemation is required by 3° CFN 1.32.1. The information is required by 00 contain of read a operating the process within 15 to 10 erg 10 contains of the process of t